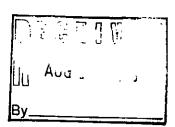
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FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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3	♥ OOMB APP	ROVAL	
رن دن	OMB Number: Expires:	3235-0	076
5	Estimated average	age burden	
Š	hours per respo	nse16	3.00
	SEC USE	ONLY	
	Prefix	Senal	
	DATE RECE	EIVED	

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Phoenix Materials, Inc. 504 Offering of Common Stock Filing Under (Check box(es) that apply):	□ ULOE
Type of Filing: New Filing Amendment	
The arrange.	HARRUM BRITIS FRANK
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	08059642
Phoenix Materials, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2650 Palumbo Drive, Lexington, KY 40555	1-856-335-0111
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Research, development, manufacture and servicing of films, resins, coatings and other tech	nologies for various industrial sectors including
automotive and aerospace.	DDOCESSED_
Type of Business Organization	PROCESSED—
	olease specify):
business trust limited partnership, to be formed	SEP 1 2 2008
Month Year	
	THOMSON REUTERS
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	-
CA for Callada, FIV for Other foreign jurisdiction)	DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA						
2. Enter the information re	equested for the fol	lowing:							
 Each promoter of t 	he issuer, if the iss	suer has been organized v	within the past five years;						
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.									
Each executive off	icer and director o	f corporate issuers and o	f corporate general and man	naging partners of	partnership issuers; and				
Each general and r	nanaging partner o	f partnership issuers.							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Jeffrey P. Heath	I IIIdividual)								
Business or Residence Address 551 Gingermill Lane, Lex	,		Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)				······································				
Carolyn A. Heath	•								
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)						
551 Gingermill Lane, Lexi	ington, KY 4050	9	-						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i Brian J. Grossman	if individual)								
Business or Residence Addre	ss (Number and	Street, City, State, Zip (Code)						
3197 HW Fairway Height	s Drive, Bend, C	R 97701							
Check Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Richard Rubin									
Business or Residence Addre	ess (Number and	Street, City, State, Zip (Code)						
8607 Wellsley Court, Cir	ncinnati, OH 452	249							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, Saseidi Limited	if individual)								
Business or Residence Addresco 2650 Palumbo Drive	•		Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first,	if individual)								
Business or Residence Addre	ess (Number and	Street, City, State, Zip (Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first,	if individual)			.,					
Business or Residence Address	ess (Number and	Street, City, State, Zip	Code)						
	(Use bla	ink sheet, or copy and us	e additional copies of this	sheet, as necessary)				

					B. F	FORMAT	ON ABOU	t offeri	NG					
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No S					
	Answer also in Appendix, Column 2, if filing under ULOE.													
2.								s_4,5	00.00					
									Yes	No				
3.			permit joint		_							X		
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
	Full Name (Last name first, if individual) Not applicable.													
			Address (N	umber and	Street Ci	tv. State. Z	in Code)							
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-,,, -								
Naı	ne of Ass	sociated Bi	roker or De	aler				•						
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers							
	(Check	"All State:	s" or check	individual	States)				•			All States		
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR	
Ful	l Name (Last name	first, if indi	vidual)										
Bu	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)			<u>.</u>			···	
Na	ne of As	sociated B	roker or De	aler							· · ·			
Sta			Listed Has											
	(Check	"All State:	s" or check	individual	States)				***************************************			☐ Al	l States	
	AL II. MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR	
Ful	l Name (Last name	first, if ind	ividual)										
Bu	siness or	Residence	Address (I	Number an	d Street, C	ity, State,	Zip Code)							
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States)								l States						
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	: 1		
	Type of Security	Aggregate Offering Pric	e	Amount Afready Sold
	Debt	\$		\$
	Equity	\$ 600,000.00	1	\$_289,920.00
	Common Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	\$		\$
	Other (Specify)	\$		s
	Total	\$ 600,000.00)	\$ 289,920.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	•		Aggregate Dollar Amount of Purchases
	Accredited Investors			\$ 289,920.00
	Non-accredited Investors			s
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	s e		
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		_	\$_0.00
	Regulation A			\$_0.00
	Rule 504	·		\$_0.00
	Total		_	\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure in not known, furnish an estimate and check the box to the left of the estimate.	r.		
	Transfer Agent's Fees			\$
	Printing and Engraving Costs		Ø	<u>\$</u> 50.00
	Legal Fees			\$ 4,000.00
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)		П	\$
	Other Expenses (identify)			\$
	Total			\$ 4,050.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees] s	
	Purchase of real estate] \$	s
	Purchase, rental or leasing and installation of machinery and equipment		Z \$_100,000.00
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
	Repayment of indebtedness	s	s
	Working capital	s	. 🗆 \$
	Other (specify): Build necessary trade inventories for IsoBooth business line and fund		✓ \$ 496,950.00
	ongoing operating expenses. Fund formation of wholly owned entity in China.		
		¬s	□\$
	Column Totals		
	Total Payments Listed (column totals added)	_	96,950.00
	D. PEDERAL SIGNATURE		
sig	c issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice mature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of F	sion, upon writte	ale 505, the following on request of its staff
lss	uer (Print or Type) Signature	Date	
Pi	noenix Materials, Inc.	E 1	- 62
Na	me of Signer (Print or Type) Title of Signer (Print or Type)		
	frey P. Heath Director and President		

END

ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)